FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

	Check this box if no longer subject t
∇	Section 16. Form 4 or Form 5 obligations may continue. See
\triangle	obligations may continue. See
	Instruction 1(b).

51 ASTOR PLACE, 10TH FLOOR

1. Name and Address of Reporting Person^{\star}

51 ASTOR PLACE, 10TH FLOOR

NY

(State)

Perceptive Xontogeny Venture Fund II, LP

(First)

10003

(Middle)

(Street) NEW YORK

Instructi	ons may contin on 1(b).	ue. See			Filed			Section 16(1934			h	ours per re	esponse:		0.5
L. Name and Address of Reporting Person* PERCEPTIVE ADVISORS LLC						2. Issuer Name and Ticker or Trading Symbol CARGO Therapeutics, Inc. [CRGX] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner										ner				
(Last) (First) (Middle) 51 ASTOR PLACE, 10TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) below) A bell 11/14/2023 Former 10% Owner									her (sp low)						
Street) NEW YC	ORK N	NY 10003				If Amendment, Date of Original Filed (Month/Day/Year) C. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person										<i></i>				
(City)	((State) (Zip)				Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
			Table I - N	lon-D	eriva	tive	Sec	urities Ac	cquire	d, D	isposed	of, or B	eneficia	ally	Owned					
L. Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Ye		Exec if any	Deemed ution Date, / th/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Followi			6. Owner Form: Di (D) or In- ving (I) (Instr.		Indire Bene Owne	neficial vnership	
									Code	v	Amount	(A) o (D)	r Price		Transaction((Instr. 3 and				(Instr	. 4)
Common	Stock			11/	14/20	23			С		2,579,50	02 A	(1)		2,579,5	02	I	I		notes ⁽²⁾⁽⁴⁾
Common Stock 1			11/	14/20	2023			P		333,33	3 A	\$15	5	2,912,835				See Foot	ootnotes ⁽²⁾⁽⁴⁾	
Common	Stock			11/	/14/20	23			P		333,33	3 A	\$15	5	333,33	33	I	[See Foot	notes ⁽³⁾⁽⁴⁾
			Table I					rities Acq , warrants							Owned					
L. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day	l Date,	4. Transa				6. Date Exerc Expiration Da (Month/Day/Y		isable and	7. Title and Amount Securities Underlyi Derivative Security (Instr. 3 and 4)		of	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Owners Form: Direct (I or Indire (I) (Instr	hip I E O) (ect (11. Nature of ndirect Beneficial Ownership Instr. 4)
				Code		e V	(A) (I	(D)	Date Exercisa	able	Expiration Date	Title	Amount Number Shares			Transa (Instr.	action(s) 4)			
Series A-1 Convertible Preferred Stock	(1)	11/14/2023			С			2,579,502	(1)		(1)	Common Stock	2,579,5	502	(1)		0	I	S	See Footnotes ⁽²⁾⁽⁴⁾
		Reporting Person*	<u>LC</u>																	
(Last) 51 ASTO	R PLACE,	(First) 10TH FLOOR	(Mid	dle)																
(Street) NEW YORK NY 10003																				
(City)		(State)	(Zip)																	
		Reporting Person*	ES MAS	TER	RFUI	<u>ND</u>														
(Last)		(First)	(Mide	dle)																

(Street)									
NEW YORK	NY	10003							
(City)	(State)	(Zip)							
1. Name and Address	s of Reporting Person*								
EDELMAN JOSEPH									
,									
(Last)	(First)	(Middle)							
51 ASTOR PLAC	CE, 10TH FLOOR								
(Street)									
NEW YORK	NY	10003							
(City)	(State)	(Zip)							

Explanation of Responses:

- 1. Each share of the Issuer's Series A-1 convertible preferred stock will automatically convert into shares of the Issuer's common stock immediately upon the closing of the Issuer's initial public offering. The Series A-1 convertible preferred stock has no expiration date.
- 2. The securities are directly held by Perceptive Xontogeny Venture Fund II, L.P. ("PXV II"). Perceptive Venture Advisors, LLC (the "Venture Advisor") serves as the investment manager of PXV II and is controlled by Perceptive Advisors LLC (the "Advisor"), and Perceptive Xontogeny Venture II GP, LLC ("PXV GP") is the general partner of PXV II. Mr. Edelman is the managing member of PXV GP and the Advisor.
- 3. The securities are directly held by Perceptive Life Sciences Master Fund Ltd. (the "Master Fund"). The Advisor serves as the investment manager of Master Fund.
- 4. The Venture Advisor, the Advisor, PXV GP and Mr. Edelman disclaim, for purposes of Section 16 of the Securities Exchange Act of 1934, beneficial ownership of such securities, except to the extent of his or its indirect pecuniary interest therein, and this report shall not be deemed an admission that they are the beneficial owner of such securities for purposes of Section 16 or for any other purposes.

/s/ Joseph Edelman, for Perceptive Advisors LLC, By: 11/14/2023 Joseph Edelman, its managing member /s/ Joseph Edelman, for Perceptive Life Sciences Master Fund Ltd., By: Perceptive 11/14/2023 Advisors LLC, its investment manager, By: Joseph Edelman, its managing member /s/ Joseph Edelman, for Perceptive Xontogeny Venture Fund II, L.P., By: Perceptive 11/14/2023 Xontogeny Ventures II GP, LLC, its general partner, By: Joseph Edelman, its managing member /s/ Joseph Edelman 11/14/2023 ** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

 $Note: File\ three\ copies\ of\ this\ Form,\ one\ of\ which\ must\ be\ manually\ signed.\ If\ space\ is\ insufficient,\ see\ Instruction\ 6\ for\ procedure.$

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.